



Feb. 21 2007 4:26PM

EDWARDS ANGELL PALMER &amp; DODGE

No. 4663 P. 3

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23838 .7590 11/21/2006

KENYON & KENYON LLP  
1500 K STREET N.W.  
SUITE 700  
WASHINGTON, DC 20005

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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Deise Kacinski	(Depositor's name)
<i>Deise Kacinski</i>	(Signature)
February 21, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/503,852	02/15/2000	Jonathan L. Tilly	2653/28	5439

TITLE OF INVENTION: PROTECTION OF THE FEMALE REPRODUCTIVE SYSTEM FROM NATURAL AND ARTIFICIAL INSULTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$0	\$700	02/21/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HARTLEY, MICHAEL G	1618	424-430000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.303).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Edwards Angell Palmer  
& Dodge LLP  
2  
3 Amy M. Leahy

## 3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The General Hospital Corporation

Boston, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☐ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 04-1105 (enclose an extra copy of this form).

5 Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Amy M. Leahy

Date February 21, 2007

Typed or printed name Amy M. LeahyRegistration No. 47,739

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PAGE 3/6 \* RCVD AT 2/21/2007 4:26:50 PM [Eastern Standard Time] \* SVR:USPTO-EFXXF-6/46 \* DNIS:2732885 \* CSID: \* DURATION (mm-ss):01:46

02/22/2007 TTRAN2 00000045 041105 09503852

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21. 2007 4:26PM

EDWARDS ANGELL PALMER &amp; DODGE

No. 4663 P. 1

## FAX TRANSMISSION

**DATE:** February 21, 2007**PTO IDENTIFIER:** Application Number 09/503,852-Conf. #5439  
Patent Number**Inventor:** Jonathan L. Tilly et al.**MESSAGE TO:** Office of Patent Publication MS ISSUE FEE**FAX NUMBER:** (571) 273-2885**FROM:** EDWARDS ANGELL PALMER & DODGE LLP

Amy M. Leahy

**PHONE:** (203) 975-7505**Attorney Dkt. #:** 64982(51588)**PAGES (Including Cover Sheet):** 6**CONTENTS:** Fee Transmittal (1 page)  
Transmittal Letter (2 pages)  
Charge \$1,000.00 to deposit account 04-1105  
Certificate of Transmission (1 page)

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**Telephone:** (203) 975-7505 **Facsimile:** (617) 439-4170



2007 4:26PM

EDWARDS ANGELL PALMER & DODGE

No. 4663 P. 2

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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Application No. (if known): 09/503,852

Attorney Docket No.: 64982(51588)

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on February 21, 2007  
Date

Denise Kacinski

Signature

Denise Kacinski

Typed or printed name of person signing Certificate

Registration Number, if applicable

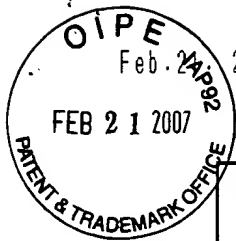
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No. 4663 P. 4

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Dated: February 21 2007

Signature:

*Denise Kacinski*  
(Denise Kacinski)

Docket No.: 64982(51588)  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of  
Jonathan L. Tilly et al.

Application No.: 09/503,852

Confirmation No.: 5439

Filed: February 15, 2000

Art Unit: 1618

For: PROTECTION OF THE FEMALE  
REPRODUCTIVE SYSTEM FROM  
NATURAL AND ARTIFICIAL INSULTS

Examiner: Michael G. Hartley

**TRANSMITTAL LETTER**

MS Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

1. Fee Transmittal (1 page) and
2. Certificate of Transmission (1 page).

Please charge our Deposit Account No. 04-1105 in the amount of \$1,000.00 covering the required fees. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with

Application No.: 09/503,852

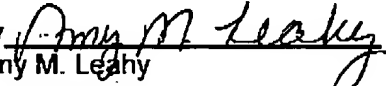
2

Docket No.: 64982(51588)

any paper hereafter filed in this application by this firm) to our Deposit Account No. 04-1105, under Order No. 64982(51588).

Dated: February 21, 2007

Respectfully submitted,

By   
Amy M. Leahy

Registration No.: 47,739

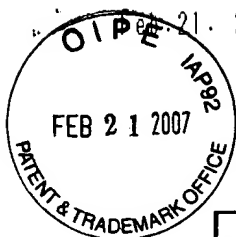
EDWARDS ANGELL PALMER & DODGE  
LLP

P.O. Box 55874

Boston, Massachusetts 02205

(203) 975-7505

Attorneys/Agents For Applicant



Feb 21, 2007 4:27PM

EDWARDS ANGELL PALMER &amp; DODGE

No.4663 P. 6

PTO/SB17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032  
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
<b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		Application Number	09/503,852-Conf. #5439
		Filing Date	February 15, 2007
		First Named Inventor	Jonathan L. Tilly
		Examiner Name	Michael G. Hartley
		Art Unit	1618
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	64982(51588)
<b>TOTAL AMOUNT OF PAYMENT (\$)</b> 1,000.00			

**METHOD OF PAYMENT (check all that apply)**

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify):
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>04-1105</u> Deposit Account Name: <u>Edwards Angell Palmer &amp; Dodge LLP</u>				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
20 =	x	=		Fee (\$)
HP = highest number of total claims paid for, if greater than 20.				
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
3 =	x	=		
HP = highest number of independent claims paid for, if greater than 3.				

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
100 =	150	(round up to a whole number) x		

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 2501 Utility issue fee	700.00
1504 Publication fee for early, voluntary, or normal	300.00

SUBMITTED BY			
Signature	<i>Arny M. Leahy</i>	Registration No. (Attorney/Agent)	47,739
Name (Print/Type)	Arny M. Leahy	Telephone	(203) 975-7505
		Date	February 21, 2007

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Dated: February 21, 2007

Signature: *Denise Kacinski* (Denise Kacinski)